



02-13-07

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26161 7590 11/20/2006

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for express mail EV828215799US in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Michelle George	(Depositor's name)
<i>Michelle George</i>	(Signature)
February 12, 2007	(Date)

FISH & RICHARDSON P.C.

P.O. Box 1022

Minneapolis, MN 55440-1022

02/14/2007 H8UTEM2 00000014 10664795

01 FC:1501

1400.00 DP

02 FC:1504

300.00 DP

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/664,795	09/19/2003	Seishiro Fujii	10287-077001	3494

TITLE OF INVENTION: METHODS AND COMPOSITIONS FOR PREVENTING SKIN DAMAGE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	02/20/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
GITOMER, RALPH J.	1657	435-375000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Fish & Richardson P.C. _____

2. _____

3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE (CITY and STATE OR COUNTRY)

The General Hospital Corporation

Boston, MA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
☐ Advance Order - # of Copies _____

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5. Change in Entity Status (from status indicated above)

☐ .a. Applicant claims SMALL ENTITY status. See 37 CFR 1.2.7.

☐ .b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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(Authorized Signature)

Ramon K. Tabtiang

(Date)

12 Feb 2007

Typed or Printed Name

Ramon K. Tabtiang

Registration No. 55,658

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